2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000092696

3607 2ND DR NE

BRADENTON, FL 34208 US

Address:

City-St-Zip:

FILED Apr 30, 2004 Secretary of State

Entity Nam	ne: DISH ADV	ANTAGE, INC.		•	
Current Principal Place of Business:			New Principal Place	of Business:	
9302 E. DR SUITE 1311 TAMPA, FL					
Current Mailing Address:			New Mailing Addres	s:	
PO BOX 53 MANGO, FI		:			
FEI Number:	57-1183117	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
9302 E. DR SUITE 1311 TAMPA, FL	33610 US named entity si	ubmits this statement for the pu	rpose of changing its registere	d office or registered agent, or both,	
SIGNATUR					
Electronic Signature of Registered Agent			nt .	 Date	
Election Cam	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	MOSELY, WALT	K BLVD. SUITE 1311	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () I BRADBURY, ER 3607 2ND DR NE BRADENTON, FI	<u> </u>	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	ST () I BRADBURY, CH	Delete ERYL R	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: CHERYL BRADBURY ST 04/30/2004